

**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: ELEVATOR APPARATUS

Attorney Docket Number:: 025260-096

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 15

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Takuo

Middle Name::

Family Name:: KUGIYA

Name Suffix::

City of Residence:: Tokyo

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: c/o Mitsubishi Denki Kabushiki Kaisha, 2-3,  
Marunouchi 2-Chome, Chiyoda-ku

City of Mailing Address:: Tokyo

State or Province of Mailing  
Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing  
Address:: 100-8310

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Takaharu
Middle Name::	
Family Name::	UEDA
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o Mitsubishi Denki Kabushiki Kaisha, 2-3, Marunouchi 2-Chome, Chiyoda-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	100-8310
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Ken-Ichi
Middle Name::	
Family Name::	OKAMOTO
Name Suffix::	

City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o Mitsubishi Denki Kabushiki Kaisha, 2-3, Marunouchi 2-Chome, Chiyoda-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	100-8310
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Tatsuo
Middle Name::	
Family Name::	MATSUOKA
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o Mitsubishi Denki Kabushiki Kaisha, 2-3, Marunouchi 2-Chome, Chiyoda-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	

Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 100-8310

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/JP2003/014923	11/21/03

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
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### **Assignee Information**

Assignee Name:: Mitsubishi Denki Kabushiki Kaisha  
Street of Mailing Address:: 2-3, Marunouchi 2-Chome, Chiyoda-ku  
City of Mailing Address:: Tokyo  
State or Province of Mailing Address::  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 100-8310